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PTO/SB/01 (12-97)

Approved for use through 9/30/02. OMB 0551-0032
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	20066.73
	First Named Inventor	Nisalm DARVISH
	COMPLETE IF KNOWN	
	Application Number	09 / 720,639
	Filing Date	to be assigned
	Group Art Unit	
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (c)) required)
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PACING WITH HEMODYNAMIC ENHANCEMENT

The specification of which

(Title of the Invention)

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY)

12/22/2000

as United States Application Number or PCT International

Application Number

09/720,639

and was amended on (MM/DD/YYYY)

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 35(b) of any foreign application(s) for patent or inventor's certificate, or 35(b) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by indicating the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
125424	IL	07/20/1998	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

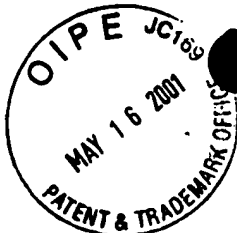
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/026 attached hereto;

I hereby claim the benefit under 35 U.S.C. 115(a) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/026 attached hereto.

(Page 1 of 2)

BURDEN HOUR ESTIMATE: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual user. Any comments on the ease of use of this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20221. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20221



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DECLARATION -- Utility or Design Patent Application

I hereby declare the present (under 35 U.S.C. 111) or the United States application, or both (if any) of my PCT international application, containing the United States of America, filed under my name, or the name of the assignor of the same, is not a duplicate of any other application for a patent or design in the United States or in any foreign country, and that the same is not a duplicate of any other application for a patent or design in the United States or in any foreign country, and that the same is not a duplicate of any other application for a patent or design in the United States or in any foreign country.

U.S. Patent Application or PCT Patent Number PCT/IL89/00382	Parent Filing Date 08/18/1988	Parent Patent Number (if applicable)
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☐ Additional U.S. or PCT applications (or applications) have been filed on a substantially identical or similar subject matter.

As a required statement, I hereby declare the following information is true and correct to the best of my knowledge and belief, and I am not aware of any information that would cause this statement to be untrue.

☐ Customer Number: **64** ☐ Correspondence address below

Name	Registration Number	Name	Registration Number
Michael I. Wolfson	24,760	Mark Montague	38,812
William H. Dippert	26,728		
R. Louis Gable	22,479		

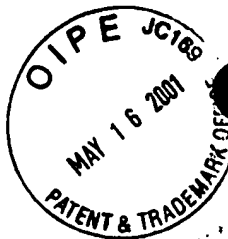
☐ Direct all correspondence to: ☐ Customer Number or Bay Code Label ☐ Correspondence address below

Name	William H. Dippert				
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I hereby declare that all statements made herein are true and correct to the best of my knowledge and belief, and I am not aware of any information that would cause this statement to be untrue.

Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unnamed inventor	
First Name (First and middle if used)		Surname Name as registered	
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Mobile Phone	646	Mobile Phone	646
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Post Office Address			
City	Hatfield	State	MA
Country	USA	Country	Israel

Additional inventors are being named on the **1** Supplemental Declaration (Serial PCT/IL89/00382) attached hereto.



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PTO/SB/02A (2-87)
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Bella				Felsen			
Inventor's Signature	[Signature]			Date	16.4.2001		
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Harzi Street 20							
Post Office Address							
City	Haifa	State		ZIP	34365	Country	Israel
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
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Itzik				Shemer			
Inventor's Signature	[Signature]			Date	4/17/2001		
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Hayarkon Street 11							
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Judith				Kornfeld			
Inventor's Signature	[Signature]			Date	20/01 4/17		
Residence: City	Haifa	State		Country	Israel	Citizenship	ISR
Post Office Address							
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Post Office Address							
City	Haifa	State		ZIP	34924	Country	Israel

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